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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/701,315			ing Date 09/2001	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY
FOR NU			UMBER FIL	ILED NUMBER EXTRA		Г	RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		1	N/A	
	SEARCH FEE (37 CFR 1.16(k), (f),		N/A		N/A		N/A			N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),	E or (q))	N/A		N/A		N/A		1	N/A	
	FAL CLAIMS CFR 1.16(i))		minus 20 =		*		x \$ =		OR	x \$ =	
	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 = *				x \$ =		1	x \$ =	
□APPLICATION SIZE FEE (37 CFR 1.16(s))  If the specification as sheets of paper, the is \$250 (\$125 for sm additional 50 sheets 35 U.S.C. 41(a)(1)(0)					n size fee due for each n thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									ı		
* If	he difference in coli	umn 1 is less than	r "0" in column 2.		TOTAL			TOTAL			
APPLICATION AS AMENDED – PART II  OTHER THAN  (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY  CLAIMS HIGHEST											
AMENDMENT	03/28/2007	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	+ 22	Minus	·· 20	= 2	1	x \$ =		OR	X \$50=	100
	Independent (37 CFR 1,16(h))	٠6	Minus	···6	= 0	1	x \$ =		OR	X \$200=	0
	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					ı			OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	100
		(Column 1)		(Column 2)	(Column 3)						
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16())	*	Minus	**	=	]	x \$ =		OR	x \$ =	
	Independent (37 CFR 1.16(h))		Minus	***	=	l	x \$ =		OR	x \$ =	
	Application Size Fee (37 CFR 1.16(s))					l	<u> </u>		l	<u> </u>	
ΑV	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
TOTAL TOTAL ADDL FEE FEE FEE											
"If the entry in column 1 is less than the entry in column 2, write 0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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